

**Application Data Sheet**

**Application Information**

Application Number::

Filing Date::

Application Type:: Divisional

Subject Matter:: Utility

CD-ROM or CDR?::

Number of CD Discs::

Number of copies of CDs::

Sequence Submission?::

Computer Readable Form  
(CRF?)::

Number of Copies of CRF::

Title:: NEW HUMAN CATHEPSIN

Attorney Docket No):: PF-0331-3 DIV

Request for Early Publication:: No

Request for Non-Publication:: No

Total Drawings Sheets:: 6

Small Entity:: No

**Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full capacity

First Name:: Olga

Middle Name::

Last Name:: Bandman

Name Suffix::

City of Residence:: Mountain View

State or Province of Residence:: CA

Street of mailing address:: 366 Anna Avenue  
City of mailing address:: Mountain View  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94043

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Switzerland  
Status:: Full capacity  
First Name:: Karl  
Middle Name:: J  
Last Name:: Guegler  
Name Suffix::  
City of Residence:: Menlo Park  
State or Province of Residence:: CA  
Street of mailing address:: 1048 Oakland Avenue  
City of mailing address:: Menlo Park  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94025

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full capacity  
First Name:: Neil  
Middle Name:: C

Last Name:: Corley  
Name Suffix::  
City of Residence:: Castro Valley  
State or Province of Residence:: CA  
Street of mailing address:: 20426 Crow Creek Road  
City of mailing address:: Castro Valley  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94552

#### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: India  
Status:: Full capacity  
First Name:: Purvi  
Middle Name::  
Last Name:: Shah  
Name Suffix::  
City of Residence:: San Jose  
State or Province of Residence:: CA  
Street of mailing address:: 859 Salt Lake Drive  
City of mailing address:: San Jose  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 95133

#### **Correspondence Information**

Correspondence Customer Number:: 27904

**Representative Information**

Representative Customer Number:: 27904

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
<b>This Application</b>	Division of	09/519,283	12/11/02

09/519,283	Continuation Prosecution Application of	09/519,283	03/07/00
------------	---	------------	----------

09/519,283	Division of	08/883,526	06/26/97
------------	-------------	------------	----------

**Assignee Information**

Assignee name:: Incyte Corporation

Street of mailing address:: 3160 Porter Drive

City of mailing address:: Palo Alto

State or Province of mailing address:: California

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94304